PTO/SB/06 (07-06)

Approved for use through 1/31/2007. OMB 0651-0032
U.S. Patient and Trademy Coffice, U.S. Department of the Proposed for a collection of information under it discharge update any proposed for a collection of information under it discharge update.

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/600,957			ing Date 20/2003	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
⊢	FOR		UMBER FIL		MBER EXTRA	Т	RATE (\$)	FEE (\$)	<u></u>	RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b), (c)		N/A		N/A	1	N/A			N/A	, (,,	
	SEARCH FEE (37 CFR 1.16(k), (i), c		N/A		N/A		N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p), c	EE	N/A		N/A		N/A			N/A		
	TAL CLAIMS CFR 1.16(i))		mir	nus 20 = *	•		x \$ =		OR	x \$ =		
	DEPENDENT CLAIM CFR 1.16(h))			ninus 3 = *]	x \$ =			x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	E FEE sheet is \$25 additi	ets of pape 250 (\$125 tional 50 s	igs exceed 100 on size fee due for each in thereof. See CFR 1.16(s).								
	MULTIPLE DEPEN	IDENT CLAIM PR	ESENT (3	7 CFR 1.16(j))]						
* If t	the difference in colu	umn 1 is less than	zero, ente	r "0" in column 2.		_	TOTAL			TOTAL		
L	APPLICATION AS AMENDED – PART II (Column 1) (Column 2) (Column 3)							OTHER THAN SMALL ENTITY OR SMALL ENTITY				
AMENDMENT	06/08/2009	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
ĬŽ.	Total (37 CFR 1 16(i))	• 30	Minus	 34	= 0]	X \$26 =	0	OR	x s =		
뷡	Independent (37 CFR 1.16(h))	• 4	Minus	···8	= 0	1	X \$110 =	0	OR	x s =		
Ž.	Application Si	Size Fee (37 CFR 1	.16(s))			1						
_	FIRST PRESEN	NTATION OF MULTIF	PLE DEPEN	IDENT CLAIM (37 CFF	R 1.16(j))	1			OR			
Γ	-							0	OR	TOTAL ADD'L FEE		
L		(Column 1)		(Column 2)	(Column 3)							
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
Z I	Total (37 CFR 1,18(i))	•	Minus		-]	x \$ =		OR	x s =		
AMENDMENT	Independent (37 CFR 1.16(h))		Minus	***	=]	x \$ =		OR	x \$ =		
ᇳ	Application Size Fee (37 CFR 1.16(s))]						
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))]			OR			
						•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
*** If	If the entry in column 1 is less than the entry in column 2, write 0" in column 3. If the "Highest Number Previously Paid For M THIS SPACE is less than 20, enter" 20". If the "Highest Number Previously Paid For M THIS SPACE is less than 3, enter" 3". If the "Highest Number Previously Paid For M THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For M THIS SPACE is less than 3, enter "3".											

This collection of information is required by 37 CFR. 1.16. The information is required to obtain or retain a benefit by the public with in is to life (and by the USFTO to process) an application. Confidentiality is overwined by 80 LSC. 122 and 37 CFR. 1.14. This collection is estimated to take 12 minutes to complete, including pathering, preparing, and submitting the completed application form to the USFTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer. U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandris, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandris, VA 22313-1450.